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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> |  | <b>Attorney Docket No.</b> R2180.0178/P178<br><b>First Inventor</b> Kazunari Kimino<br><b>Title</b> APPARATUS AND METHOD FOR MANUFACTURING SEMICONDUCTOR DEVICE INCORPORATING FUSE ELEMENTS<br><b>Express Mail Label No.</b> |  |
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| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b> MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |
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| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><i>(Submit an original, and a duplicate for fee processing)</i><br>2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>45</b>]</span><br><i>(preferred arrangement set forth below)</i><br><ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claims</li> <li>- Abstract of the Disclosure</li> </ul> 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>10</b>]</span><br>5. Oath or Declaration <span style="float: right;">[Total Sheets <b>1</b>]</span><br>a. <input type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br><i>(for continuation/divisional with Box 18 completed)</i><br>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br><i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(e)(2) and 1.33(b).</i><br>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies<br><b>ACCOMPANYING APPLICATION PAPERS</b><br>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)<br>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)<br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: |
|--|---|


18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

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|--|---|----------------------------|------------------------------|
| <b>19. CORRESPONDENCE ADDRESS</b>  |   |                            |                              |
| <input checked="" type="checkbox"/>  | Customer Number: <b>24998</b>                   | <input type="checkbox"/>   | Correspondence address below |
| <b>Name</b> DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP<br>Thomas J. D'Amico                              |   |                            |                              |
| <b>Address</b> 2101 L Street NW  |   |                            |                              |
| <b>City</b> Washington   | <b>State</b> DC                                 | <b>Zip Code</b> 20037-1526 |                              |
| <b>Country</b> US  | <b>Telephone</b> (202) 785-9700                 | <b>Fax</b> (202) 887-0689  |                              |
| <b>Name (Print/Type)</b> Thomas J. D'Amico   | <b>Registration No. (Attorney/Agent)</b> 28,371 |                            |                              |
| <b>Signature</b>  | <b>Date</b> September 22, 2003                  |                            |                              |



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| <b>FEE TRANSMITTAL<br/>for FY 2003</b>   |  | <b>Complete if Known</b> |                       |
| Effective 01/01/2003, Patent fees are subject to annual revision.              |  | Application Number       | Not Yet Assigned      |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  | Filing Date              | Concurrently Herewith |
| <b>TOTAL AMOUNT OF PAYMENT (\$)</b> 1,482.00                                   |  | First Named Inventor     | Kazunari Kimino       |
|  |  | Examiner Name            | Not Yet Assigned      |
|  |  | Art Unit                 | N/A                   |
|  |  | Attorney Docket No.      | R2180.0178/P178       |

| <b>METHOD OF PAYMENT (check all that apply)</b>   |          |              |          | <b>FEE CALCULATION (continued)</b>   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|----------|--------------|----------|--|----------|--------------|--|-----------------|----------|--------------|----------|-----------------|----------|----------|----------|----------|----------|------------------------|--------|------|-----|-------------------------------------|-----|-----------------------------------|----|------|-----|--|-----|---------------------------------------|-----|------|-----|---------------------------|-----|--|-------|------|-------|--|----|--|------|--|------|--|--|--------------|--------|--------------|--------|---|----------|----------|----------|----------|----------|--|----|------|---|------------------------|-----|---|----|------|--------|-----------------------------------|-----|--|-----|------|-------|---------------------------------------|-----|---|----|------|-------|--|-----|--|----|------|-----|--|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:  |          |              |          | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge – late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge – late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for <i>ex parte</i> reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>410</td> <td>2252</td> <td>205</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>930</td> <td>2253</td> <td>465</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,450</td> <td>2254</td> <td>725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>1,970</td> <td>2255</td> <td>985</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>320</td> <td>2401</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>320</td> <td>2402</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>280</td> <td>2403</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive – unavoidable</td> <td></td> </tr> <tr> <td>1453</td> <td>1,300</td> <td>2453</td> <td>650</td> <td>Petition to revive – unintentional</td> <td></td> </tr> <tr> <td>1501</td> <td>1,300</td> <td>2501</td> <td>650</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>1502</td> <td>470</td> <td>2502</td> <td>235</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>1503</td> <td>630</td> <td>2503</td> <td>315</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>1460</td> <td>130</td> <td>1460</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Processing fee under 37 CFR 1.17(g)</td> <td></td> </tr> <tr> <td>1806</td> <td>180</td> <td>1806</td> <td>180</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>1809</td> <td>750</td> <td>2809</td> <td>375</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>1810</td> <td>750</td> <td>2810</td> <td>375</td> <td>For each additional invention to be examined (37CFR 1.129(b))</td> <td></td> </tr> <tr> <td>1801</td> <td>750</td> <td>2801</td> <td>375</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> </tbody> </table> |          |              |  | Large Entity    |          | Small Entity |          | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051                   | 130    | 2051 | 65  | Surcharge – late filing fee or oath |     | 1052                              | 50 | 2052 | 25  | Surcharge – late provisional filing fee or cover sheet |     | 1053                                  | 130 | 1053 | 130 | Non-English specification |     | 1812   | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |    | 1804   | 920* | 1804   | 920* | Requesting publication of SIR prior to Examiner action |  | 1805         | 1,840* | 1805         | 1,840* | Requesting publication of SIR after Examiner action |          | 1251     | 110      | 2251     | 55       | Extension for reply within first month |    | 1252 | 410   | 2252                   | 205 | Extension for reply within second month |    | 1253 | 930    | 2253                              | 465 | Extension for reply within third month |     | 1254 | 1,450 | 2254                                  | 725 | Extension for reply within fourth month |    | 1255 | 1,970 | 2255   | 985 | Extension for reply within fifth month |    | 1401 | 320 | 2401   | 160 | Notice of Appeal |  | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 140 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive – unavoidable |  | 1453 | 1,300 | 2453 | 650 | Petition to revive – unintentional |  | 1501 | 1,300 | 2501 | 650 | Utility issue fee (or reissue) |  | 1502 | 470 | 2502 | 235 | Design issue fee |  | 1503 | 630 | 2503 | 315 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(g) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37CFR 1.129(b)) |  | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |          | Small Entity |          | Fee Description  | Fee Paid |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130      | 2051         | 65       | Surcharge – late filing fee or oath  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50       | 2052         | 25       | Surcharge – late provisional filing fee or cover sheet   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130      | 1053         | 130      | Non-English specification  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520    | 1812         | 2,520    | For filing a request for <i>ex parte</i> reexamination   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*     | 1804         | 920*     | Requesting publication of SIR prior to Examiner action   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*   | 1805         | 1,840*   | Requesting publication of SIR after Examiner action  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110      | 2251         | 55       | Extension for reply within first month   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 410      | 2252         | 205      | Extension for reply within second month  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 930      | 2253         | 465      | Extension for reply within third month   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,450    | 2254         | 725      | Extension for reply within fourth month  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 1,970    | 2255         | 985      | Extension for reply within fifth month   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 320      | 2401         | 160      | Notice of Appeal   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 320      | 2402         | 160      | Filing a brief in support of an appeal   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 280      | 2403         | 140      | Request for oral hearing   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510    | 1451         | 1,510    | Petition to institute a public use proceeding  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110      | 2452         | 55       | Petition to revive – unavoidable   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,300    | 2453         | 650      | Petition to revive – unintentional   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,300    | 2501         | 650      | Utility issue fee (or reissue)   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 470      | 2502         | 235      | Design issue fee   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 630      | 2503         | 315      | Plant issue fee  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130      | 1460         | 130      | Petitions to the Commissioner  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50       | 1807         | 50       | Processing fee under 37 CFR 1.17(g)  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180      | 1806         | 180      | Submission of Information Disclosure Stmt  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40       | 8021         | 40       | Recording each patent assignment per property (times number of properties)   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 750      | 2809         | 375      | Filing a submission after final rejection (37 CFR 1.129(a))  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 750      | 2810         | 375      | For each additional invention to be examined (37CFR 1.129(b))  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 750      | 2801         | 375      | Request for Continued Examination (RCE)  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900      | 1802         | 900      | Request for expedited examination of a design application  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>750</td> <td>2001</td> <td>375</td> <td>Utility filing fee</td> <td>750.00</td> </tr> <tr> <td>1002</td> <td>330</td> <td>2002</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>520</td> <td>2003</td> <td>260</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>750</td> <td>2004</td> <td>375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table>   |          |              |          | Large Entity   |          | Small Entity |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code        | Fee (\$) | 1001     | 750      | 2001     | 375      | Utility filing fee     | 750.00 | 1002 | 330 | 2002                                | 165 | Design filing fee                 |    | 1003 | 520 | 2003   | 260 | Plant filing fee                      |     | 1004 | 750 | 2004                      | 375 | Reissue filing fee                                 |       | 1005 | 160   | 2005   | 80 | Provisional filing fee                                     |      | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1"> <thead> <tr> <th colspan="2">Total Claims</th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>28</th> <th>-20** =</th> <th>8</th> <th>x</th> <th>18</th> <th>=</th> </tr> </thead> <tbody> <tr> <td>10 <td>-3** =</td> <td>7</td> <td>x</td> <td>84</td> <td>=</td> <td>588.00</td> </td></tr> </tbody> </table>  |      |  |  | Total Claims |        | Extra Claims |        | Fee from below                                      |          | Fee Paid | 28       | -20** =  | 8        | x                                      | 18 | =    | 10 <td>-3** =</td> <td>7</td> <td>x</td> <td>84</td> <td>=</td> <td>588.00</td> | -3** =                 | 7   | x                                       | 84 | =    | 588.00 |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description  | Fee Paid |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 750      | 2001         | 375      | Utility filing fee   | 750.00   |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 330      | 2002         | 165      | Design filing fee  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 520      | 2003         | 260      | Plant filing fee   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 750      | 2004         | 375      | Reissue filing fee   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005  | 160      | 2005         | 80       | Provisional filing fee   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims  |          | Extra Claims |          | Fee from below   |          | Fee Paid     |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 28  | -20** =  | 8            | x        | 18   | =        |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 10 <td>-3** =</td> <td>7</td> <td>x</td> <td>84</td> <td>=</td> <td>588.00</td>   | -3** =   | 7            | x        | 84   | =        | 588.00       |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>FEE CALCULATION</b><br><table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>280</td> <td>2203</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>84</td> <td>2204</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> </tbody> </table> |          |              |          | Large Entity   |          | Small Entity |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code        | Fee (\$) | 1202     | 18       | 2202     | 9        | Claims in excess of 20 |        | 1201 | 84  | 2201                                | 42  | Independent claims in excess of 3 |    | 1203 | 280 | 2203   | 140 | Multiple dependent claim, if not paid |     | 1204 | 84  | 2204                      | 42  | ** Reissue independent claims over original patent |       | 1205 | 18    | 2205   | 9  | ** Reissue claims in excess of 20 and over original patent |      | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>280</td> <td>2203</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>84</td> <td>2204</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> </tbody> </table> |      |  |  | Large Entity |        | Small Entity |        | Fee Description                                     | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202                                   | 18 | 2202 | 9   | Claims in excess of 20 |     | 1201                                    | 84 | 2201 | 42     | Independent claims in excess of 3 |     | 1203                                   | 280 | 2203 | 140   | Multiple dependent claim, if not paid |     | 1204                                    | 84 | 2204 | 42    | ** Reissue independent claims over original patent |     | 1205                                   | 18 | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description  | Fee Paid |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18       | 2202         | 9        | Claims in excess of 20   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84       | 2201         | 42       | Independent claims in excess of 3  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280      | 2203         | 140      | Multiple dependent claim, if not paid  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84       | 2204         | 42       | ** Reissue independent claims over original patent   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18       | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description  | Fee Paid |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18       | 2202         | 9        | Claims in excess of 20   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 84       | 2201         | 42       | Independent claims in excess of 3  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 280      | 2203         | 140      | Multiple dependent claim, if not paid  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 84       | 2204         | 42       | ** Reissue independent claims over original patent   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18       | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent   |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (1) (\$)</b> 750.00   |          |              |          | <b>SUBTOTAL (2) (\$)</b> 732.00  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (3) (\$)</b> 0.00   |          |              |          | <b>SUBTOTAL (4) (\$)</b> 0.00  |          |              |  |                 |          |              |          |                 |          |          |          |          |          |                        |        |      |     |                                     |     |                                   |    |      |     |  |     |                                       |     |      |     |                           |     |  |       |      |       |  |    |  |      |  |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |   |                        |     |   |    |      |        |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |     |  |    |      |     |  |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |

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